

we will only be spending 2 cents of every dollar you pay in taxes on debt service. And 15 years from now, if the Congress wants to give more tax relief, let them do it; 15 years from now, if we're on the verge of a comprehensive cure for cancer and they want to give it to the National Institute of Health, let them do it; 15 years from now, if we have some other big crisis and we want to have a major investment in education, as we did when we got into the space race, let them do it.

We should be willing to give some of these decisions to the future, instead of taking it now, when it looks easy, but we'd be squandering a historic responsibility. I am quite willing to leave a decision like that to the future. A lot of you may be here then. I'd like for you to have the option to do what is necessary.

So again I say, underneath all these complexities, there is a fundamentally simple choice. Should our first priority be an across-the-board tax cut now, of a size which will keep us from dedicating a lot of this surplus to Medicare and will reduce our ability to pay down the debt and keep down interest rates and keep up investments over the long run and tie the hands of future decision-makers? Or, should our priority be to save Social Security and Medicare and have targeted tax relief to help retirement savings be built up in middle class families that have not been doing it or that need more, in a way that maximizes our ability to pay down the debt?

Some people in this room have heard me tell this story too many times, but I want to say it one more time. When I was a freshman in college and I took a course in the history of civilization, in the last lecture of the year, my professor at Georgetown said that the distinguishing characteristic of Western civilization was that we had always, at critical junctures, been driven by what he called "future preference," the idea that the future can be better than the present and that each individual and society as a whole have a personal, moral responsibility to make it so.

Now, that's really what this is about. Their idea sounds simpler, sounds good, even sounds fair: 10 percent for everybody. Our idea will give you a stronger economy, will

save Social Security and Medicare, will stabilize families, will strengthen the ability of the United States to lead the world, and will make you feel a whole lot better 15 years from now when you're dealing with both the opportunities and the pain of time and chance that affects us all.

You know, I see a few of the young people here today with ashes on their foreheads. Yesterday was Mardi Gras; for Christians, today is Ash Wednesday. For people all over the world this is about to be springtime and a season of renewal. This is a time for renewal. I hope we make the right decision, mostly for your sake. And I believe we will.

Thank you, and God bless you.

NOTE: The President spoke at 3 p.m. in the East Room at the White House. In his remarks, he referred to Sharon Brigner, clinical nurse, National Institutes of Health, who introduced the President.

### **Statement on Senator Frank R. Lautenberg's Decision Not To Seek Reelection**

*February 17, 1999*

Senator Frank Lautenberg has been a great public servant and a principled champion of the people of New Jersey and the children of America. He has done as much as any other citizen to protect our young people from tobacco, was the author of the national law raising the drinking age, and passed legislation barring those convicted of domestic abuse from owning guns. He has led our efforts to pass a clean environment on to the next generation. With his hard-headed business sense, he has helped bring balance to the books of the Federal Government, working with me to craft a balanced budget that invests in the education and health care of our people. Frank Lautenberg has been tough, tireless, and tremendously effective. And more than that, he has been a great friend. Hillary and I wish him the best.

**Letter to Congressional Leaders  
Transmitting a Report on the  
National Emergency With Respect to  
Iraq**

*February 17, 1999*

*Dear Mr. Speaker: (Dear Mr. President:)*

As required by section 401(c) of the National Emergencies Act, 50 U.S.C. 1641(c), and section 204(c) of the International Emergency Economic Powers Act, 50 U.S.C. 1703(c), I transmit herewith a 6-month periodic report on the national emergency with respect to Iraq that was declared in Executive Order 12722 of August 2, 1990.

Sincerely,

**William J. Clinton**

NOTE: Identical letters were sent to J. Dennis Hastert, Speaker of the House of Representatives, and Albert Gore, Jr., President of the Senate.

**Remarks in a Roundtable Discussion  
on Long-Term Health Care in Dover,  
New Hampshire**

*February 18, 1999*

**The President.** Thank you very much. Thank you very much, Governor; to our panelists. I'd like to thank the mayor, the numerous State legislators who are here, city council members, and county commissioners and others. I'm delighted to be back here and delighted to have a chance to meet with all of you and to hear from our panelists about an issue that I had a lot of conversations like this about in 1991 and 1992 in New Hampshire.

I came here to talk about the health care needs of our people, what we can do to address them, and the special responsibilities we have now as a result of the aging of America. As all of you know, the number of people over 65 is going up dramatically. When the baby boomers retire, we will have double the number of people over 65 we do today. And that imposes all sorts of challenges on our country, on the Nation as a whole and on the States.

I want to compliment the Governor for the marvelous work that she has done here in New Hampshire, taking full advantage of our

children's health program, which, as she said, was part of the Balanced Budget Act. We think it will enable us to provide health insurance to at least 5 million of the 10 million children in our country who don't have it if the States will vigorously implement it. And New Hampshire has done a terrific job. And I also appreciate the work she's done on health access, disability, and other issues. We'll talk about some of that today.

Our panelists today are going to talk about a number of the health challenges we face, the right of patients to have proper health care, and you talked about the right to sue. As you know, I tried very hard last year, and I'm trying again now to pass Federal legislation which would give people the right to seek redress from HMO's if they suffer wrongfully. We want to talk about how hard it is for small businesses still to provide coverage. We want to talk about the health care needs of the elderly and children and people with disabilities.

As I said, all of these health care needs are going to be complicated by the aging of America. They're going to be complicated by the fact that as we live longer, more and more of us will need some sort of long-term care. And that's why one of the things in our balanced budget is \$1,000 tax credit to help families defray the cost of providing long-term care for elderly or disabled loved ones.

We also, because health care is improving, we'll have larger numbers of people with disabilities who deserve the chance to go to work, if they can work, to have health care, to live to the fullest of their abilities.

I believe that we need to see this in the context of a larger picture. But I would like to say just a word about the discussions that will inevitably be held about a problem that we could—no one would have believed if we had talked about it 6 years ago in New Hampshire or 7 years ago, and that is what to do with the surplus. *[Laughter]* That was an inconceivable discussion in 1991 and 1992 in New Hampshire.

There are all kinds of ideas—let me just say that because we have a challenge with the aging of America, which affects not only those who will be seniors but their children and grandchildren—I can tell you as the oldest of the baby boomers, one of the things